

Statement of
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“Comprehensively Combating Methamphetamine: Impact on Health and the Environment”

Chairmen Gillmor and Deal, Representatives Solis and Brown, and distinguished members of the House on Health and the House Environment and Hazardous Materials Subcommittees, on behalf of Drug Enforcement Administration (DEA) Administrator Karen Tandy, I appreciate your invitation to testify today regarding the **“Comprehensively Combating Methamphetamine: Impact on Health and the Environment”**. I am pleased to testify on the DEA’s efforts to combat methamphetamine trafficking and its abuse across the United States.

Methamphetamine’s devastating consequences are felt across the country by innocent children and adults, governmental agencies, businesses and communities of all sizes. More commonly known as “meth,” this highly addictive stimulant can be easily manufactured using “recipes” available over the Internet and ingredients available at most major retail outlets. While meth used to be associated only with a few outlaw motorcycle gangs (OMG), the use and manufacturing of this deadly substance is now a national problem. Today few communities in the United States have not been impacted by methamphetamine.

Unlike other, better-known drugs of abuse such as heroin, cocaine, or marijuana, methamphetamine presents some unique challenges. First, it is synthetic, relying on no harvested crops for its manufacture. Unfortunately, the “recipe” to manufacture this synthetic drug is relatively straightforward, and easy to find on the Internet. It can be made using readily available precursor chemicals by anyone who can follow simple instructions. Second, meth has hit rural areas in the United States particularly hard, communities where resources to combat this drug are less available. Third, methamphetamine is a particularly intense stimulant, highly addictive, and overwhelmingly dangerous. The combination of these factors requires a multi-faceted response.

In an effort to combat methamphetamine, the DEA aggressively targets those who traffic in and manufacture this dangerous drug, as well as those who traffic in the chemicals utilized to produce it. We have initiated and led successful enforcement efforts focusing on meth and its precursor chemicals. Everyday the DEA works side by side with our federal, state and local law enforcement partners to combat the scourge of meth. Last spring, DEA Administrator Tandy directed DEA’s Mobile Enforcement Teams (MET) to prioritize methamphetamine trafficking organizations during their deployments. These and other initiatives have resulted in tremendously successful investigations that have dismantled and disrupted high-level methamphetamine trafficking organizations, as well as dramatically reduced the amount of pseudoephedrine illegally entering our country.

The DEA is well aware that combating this drug requires a multi-faceted approach by law enforcement. In addition to our enforcement efforts, the DEA is combating this drug by administering the cleanup of labs across the country, providing assistance to the victims of methamphetamine, and educating communities on the dangers of this drug. The DEA also

monitors state legislation aimed at combating methamphetamine and has noted the success experienced by some states in reducing the number of small toxic labs within their borders. Additionally, the Administration supports the development of Federal legislation to fight methamphetamine production, trafficking, and abuse. Any such legislation should balance law enforcement needs with the need for legitimate consumer access to widely-used cold medicines.

Methamphetamine Trends Across the Country

The methamphetamine seized and abused in the United States originates from two general sources, controlled by two distinct groups. Most of the methamphetamine found in the United States is produced by Mexico-based and California-based Mexican drug trafficking organizations. These drug trafficking organizations control “super labs” which produce the majority of methamphetamine available throughout the United States. Mexican criminal organizations control most mid-level and retail methamphetamine distribution in the Pacific, Southwest, and West Central regions of the United States, as well as much of the distribution in the Great Lakes and Southeast regions. Mexican midlevel distributors sometimes supply methamphetamine to OMGs and Hispanic gangs for retail distribution throughout the country.

Asian methamphetamine distributors (Filipino, Japanese, Korean, Thai, and Vietnamese) are also active in the Pacific region, although Mexican criminal groups trafficking in “ice methamphetamine” have supplanted Asian criminal groups as the dominant distributors of this drug type in Hawaii. OMGs distribute methamphetamine throughout the country, and reports indicate that they are particularly prevalent in many areas of the Great Lakes region, New England, and the New York/New Jersey region.

The second source for methamphetamine comes from “small toxic laboratories” (STLs), which supplement the supply of foreign manufactured methamphetamine in the United States. Initially found only in the most Western States, there has been a steady increase and eastward spread in the number of STL’s found in the United States. Many methamphetamine abusers quickly learn that the drug is easily produced and that it can be manufactured using common household products found at retail stores. For approximately \$100 in “materials”, a methamphetamine “cook” can produce approximately \$1,000 worth of this poison. Items such as rock salt, battery acid, red phosphorous road flares, pool acid, and iodine crystals can be used as sources of the necessary chemicals. Precursor chemicals such as pseudoephedrine can be extracted from common, over-the-counter cold medications, regardless of whether it is sold in liquid, gel, or pill form. Using relatively common items such as mason jars, coffee filters, hot plates, pressure cookers, pillowcases, plastic tubing, gas cans, etc., a clandestine lab operator can manufacture meth almost anywhere without the need for sophisticated laboratory equipment.

Widespread use of the Internet has facilitated the dissemination of technology used to manufacture methamphetamine in STLs. This form of information sharing allows wide dissemination of these techniques to anyone with computer access. Aside from marijuana, methamphetamine is the only widely abused illegal drug that is capable of easily being produced by the abuser. Given the relative ease with which manufacturers “cooks” are able to acquire “recipes”, ingredients, and the unsophisticated nature of the production process, it is not difficult to see why this highly addictive drug has spread across America.

STLs produce relatively small amounts of methamphetamine from a few grams to several ounces and are generally not affiliated with major drug trafficking organizations. Despite this, STLs still have an enormous impact on local communities, especially in rural areas.

A precise breakdown is not available, but current drug and lab seizure data suggests that roughly two-thirds of the methamphetamine used in the United States comes from larger labs, increasingly in Mexico, and that approximately one-third of the methamphetamine consumed in this country comes from the small, toxic laboratories.

Methamphetamine and Precursor Chemical Initiatives

The DEA is continuing to investigate, disrupt and dismantle major methamphetamine trafficking organizations through the Consolidated Priority Target list (CPOT) and our Priority Target Organization investigations (PTO). The DEA is significantly involved in the Organized Crime Drug Enforcement Task program (OCDETF) and we continue to work with state and local law enforcement agencies across the country to combat methamphetamine. Additionally, in March 2005, Administrator Tandy directed the DEA's Mobile Enforcement Teams (MET) to prioritize methamphetamine trafficking organizations during their deployments.

The DEA is striving to ensure that only legitimate businesses with adequate chemical controls are licensed to handle bulk pseudoephedrine and ephedrine in the United States. In the past seven years, over 2,000 chemical registrants have been denied, surrendered, or withdrawn their registrations or applications as a result of DEA investigations. Between 2001 and 2004, DEA Diversion Investigators physically inspected more than half of the 3,000 chemical registrants at their places of business. We investigated the adequacy of their security safeguards to prevent the diversion of chemicals to the illicit market, and audited their recordkeeping to ensure compliance with federal regulations.

The DEA is also working with our global partners to target international methamphetamine traffickers and to increase chemical control efforts abroad. The DEA has

worked hand in hand with our foreign law enforcement counterparts, and has forged agreements to pre-screen pseudoephedrine shipments to ensure that they are being shipped to legitimate companies for equally legitimate purposes. An example of our efforts is an operation we worked with our counterparts from Hong Kong, Mexico and Panama, to prevent approximately 68 million pseudoephedrine tablets from reaching “meth cartels”. This pseudoephedrine could have produced more than two metric tons of methamphetamine.

As a result of these efforts and those of our law enforcement partners, we have seen a dramatic decline in methamphetamine “super labs” in the U.S. In 2004, 55 “super labs” were seized in the United States, the majority of which were in California. This is a dramatic decrease from the 246 “super labs” seized in 2001. This decrease in “super labs” is largely a result of DEA’s enforcement successes against suppliers of bulk shipments of precursor chemicals, notably ephedrine and pseudoephedrine. Law enforcement has also seen a huge reduction in the amount of pseudoephedrine, ephedrine, and other precursor chemicals seized at the Canadian border.

In October 2004, the Administration released the National Synthetic Drugs Action Plan. In this plan, the Department of Justice, the DEA and ONDCP proclaimed the seriousness of the challenges posed by methamphetamine-along with other synthetic drugs and diverted pharmaceuticals-as well as our resolve to confront those challenges. Part of the National Synthetic Drugs Action Plan (NSDAP) specifically recognized that the move of large labs to Mexico requires that we offer assistance to help Mexico strengthen its anti-methamphetamine activities. This, in turn, requires us to work with other countries known to supply Mexican methamphetamine producers with illicit pseudoephedrine. A Synthetic Drugs Interagency Working Group (SD-IWG), co-chaired by the White House Office of National Drug Control

Policy (ONDCP) and the Department of Justice (DOJ), was directed to oversee implementation of the Action Plan. The working group was tasked with reporting their findings to the Director of National Drug Control Policy, Attorney General, and Secretary for Health and Human Services six months after the document's release. In the May 2, 2005 Interim Report the SD-IWG has responded to this portion of the Action Plan:

- China (particularly Hong Kong) has been a significant source of pseudoephedrine tablets that have been diverted to methamphetamine labs in Mexico. The United States and Mexico have obtained a commitment by Hong Kong not to ship chemicals to the United States, Mexico, or Panama until receiving an import permit or equivalent documentation and to pre-notify the receiving country before shipment.
- The United States has made significant progress in assisting Mexican authorities to improve their ability to respond to methamphetamine laboratories. The DEA has played a role by providing diversion and clandestine lab cleanup training courses for Mexican officials (both Mexican Federal and State levels).
- In conjunction with our joint efforts, Mexico this year began to impose stricter import quotas for pseudoephedrine, tied to estimates of national needs and based on extrapolations from a large population sample. Additionally, distributors have agreed to limit sales of pseudoephedrine to pharmacies, which in turn will sell no more than approximately nine grams per transaction to customers.

Other Approaches to Controlling Methamphetamine

Methamphetamine is a synthetic central nervous system stimulant that is classified as a Schedule II controlled substance. It is widely abused throughout the United States and is

distributed under the names “crank”, “meth”, “crystal” and “speed”. Methamphetamine is commonly sold in powder form, but has been distributed in tablets or as crystals (“glass” or “ice”). Methamphetamine can be smoked, snorted, injected or taken orally. The clandestine manufacture of methamphetamine has been a concern of law enforcement officials since the 1960's, when outlaw motorcycle gangs produced their own methamphetamine in labs, and dominated distribution in the United States. While clandestine labs can produce other types of illicit drugs such as PCP, MDMA, and LSD, methamphetamine has always been the primary drug manufactured in the vast majority of drug labs seized by law enforcement officers throughout the nation.

A number of states have recently pursued legislation to curtail access to pseudoephedrine products and similar meth precursors. Different states have taken very different approaches to this challenge based upon their understanding of their own unique situation, and of the balance appropriate for their circumstances between law enforcement needs and consumer access to cold medications.

In April 2004 Oklahoma enacted the first and the most far-reaching state law restricting the sale of pseudoephedrine products. This law made pseudoephedrine a Schedule V Controlled Substance. Provisions of this law included the following: limiting sales of both single-entity and combination pseudoephedrine products to pharmacies; requiring pseudoephedrine products to be kept behind the pharmacy counter; and requiring the purchaser to show identification and sign a log sheet.

Oklahoma's law was noted in the National Synthetic Drugs Action Plan, and was the first of many similar proposals introduced in State legislatures last year. The Interim Report again noted Oklahoma's law, as well as the State of Oregon's approach to restrict the sale of

pseudoephedrine products. In October 2004, Oregon adopted a similar approach to Oklahoma's model through a temporary administrative rule. However, unlike Oklahoma, Oregon allowed combination pseudoephedrine products – those containing pseudoephedrine plus other active medical ingredients – to be sold at stores other than pharmacies, provided that the products were kept in a secure location. At the time of the Interim Report's release, only four months of data were available for review. This review showed an approximate 42 percent reduction in the number of labs seized from the same months in the prior year. A review of 12 month's worth of data from Oklahoma showed a 51 percent reduction in lab seizures (April 2004 through March 2005).

The Interim Report noted that even with the stabilization in methamphetamine laboratory numbers observed nationally, no states with consistently significant numbers of methamphetamine labs have seen the reductions in lab numbers that took place in Oklahoma and to a lesser but still significant extent in Oregon. The Interim Report stated that the available data (– a year's worth of data from Oklahoma, four months of data from Oregon, and several years worth of national data) – strongly suggested that Oklahoma's and Oregon's state-level approaches were likely the primary reasons for the dramatic reduction in the number of STLs found in Oklahoma, as well as smaller reductions found in Oregon. Since the release of the Interim Report, the State of Oregon has enacted legislation which made pseudoephedrine a Schedule III Controlled Substance.

Since the release of the Interim Report, the seizure of meth labs in Oklahoma has continued to remain at low levels, with a total of 115 meth labs being seized from April through July 2005. The seizure of these 115 labs is significantly less than the seizures reported in Oklahoma during this same time period in 2004 (261) and 2003 (423).

Furthermore, the State of Oregon has recently enacted legislation that classifies pseudoephedrine as a Schedule III Controlled Substance. This law will not go into full effect until July of 2006, and we cannot draw any conclusions about this new measure's effectiveness.

Other states have since passed laws as well, some taking the Oklahoma approach and others taking a variety of less stringent approaches. As data from these states become available, it will be possible to assess the effectiveness of their efforts.

Combating Methamphetamine and Its Effects

Pseudoephedrine and ephedrine are List I chemicals which are more correctly known as "listed precursor chemicals" under the Controlled Substances Act. These are chemicals needed and used to manufacture a controlled substance. Any importer of a List I chemical must notify the DEA in advance of importation. However, once the shipment arrives, its ultimate pre-production consumer may not be the recipient identified initially by the importer. The company who placed the order may determine its needs were less than originally anticipated. For the chemical importer this means any excess not sold to the ordering company may then, legitimately, be placed on the "spot" market and sold. Unlike Schedule I and II controlled substances, List I chemicals are not subject to the same stringent record keeping requirements which track the substance from production to consumption, so neither the seller nor buyer on the "spot" market is mandated to report the sale. The only requirement is that the seller maintains a record of the transaction. Tighter regulation of the "spot" market could reduce the amount of ephedrine and pseudoephedrine diverted from legitimate production needs.

Additionally, legislation that would deal with the blister pack exemption and transaction limits would be useful. Elimination of the blister pack exemption would require all products

containing ephedrine or pseudoephedrine, regardless of how it is packaged or the form the dosage unit takes, to be subject to Federal law. The enactment of legislation closing this loop-hole will make it more difficult for meth traffickers and “cooks” to get the amount of ephedrine or pseudoephedrine they need for a cook. In addition, effective Federal legislation should include an individual purchase limit of 3.6 grams per transaction for retail sales of over-the-counter products containing pseudoephedrine. Such limits would directly impact the production of methamphetamine in STLs.

Training

In response to the spread of labs across the country, more and more state and local law enforcement officers require training to investigate and safely dismantle these labs. Since 1998, the DEA has offered a robust training program for our state and local law enforcement partners. The DEA, through our Office of Training, provides basic and advanced clandestine laboratory safety training for state and local law enforcement officers and Special Agents at the DEA Clandestine Laboratory Training Facility. DEA instruction includes the Basic Clandestine Laboratory Certification School, the Advanced Site Safety School, and the Clandestine Laboratory Tactical School. Each course exceeds Occupational Safety Health Administration (OSHA)-mandated minimum safety requirements and is provided at no cost to qualified state and local law enforcement officers. As part of this training, approximately \$2,200 worth of personal protective equipment is issued to each student, allowing them to safely investigate and work in this hazardous environment.

The DEA has trained more than 9,300 State and local law enforcement personnel (plus 1,900 DEA employees), since 1998, to conduct investigations and dismantle seized methamphetamine labs and protect the public from its toxic waste.

The Office of Training also provides clandestine laboratory awareness and “train the trainer” programs that can be tailored for a specific agency’s needs, with classes ranging in length from one to eight hours. We provide in-service training and seminars for law enforcement groups, such as the Clandestine Laboratory Investigator's Association and the International Association of Chief’s of Police. DEA also has provided training to our counterparts overseas regarding precursor chemical control, investigation and prosecution. This DEA training is pivotal to ensuring safe and efficient cleanup of methamphetamine lab hazardous waste and the arrest and prosecution of violators.

Hazardous Waste Cleanup

When a federal, state or local agency seizes a clandestine methamphetamine laboratory, Environmental Protection Agency regulations require the agency ensure that all hazardous waste materials are safely removed from the site. In 1990, the DEA established a Hazardous Waste Cleanup Program to address environmental concerns from the seizure of clandestine drug laboratories. This program promotes the safety of law enforcement personnel and the public by using qualified companies with specialized training and equipment to remove hazardous waste. Private contractors provide hazardous waste removal and disposal services to the DEA, as well as to state and local law enforcement agencies.

Victim Witness Assistance Program

More than any other controlled substance, methamphetamine trafficking endangers children through exposure to drug abuse, neglect, physical and sexual abuse, toxic chemicals, hazardous waste, fire, and explosions. In response to these tragic phenomena, the DEA has

enhanced its Victim Witness Program to identify, refer, and report these incidents to the proper state agencies. Each of the DEA's Field Divisions has a Victim/Witness Coordinator to ensure that all endangered children are identified and that the child's immediate safety is addressed at the scene by appropriate child welfare and health care service providers. Assistance has also been provided to vulnerable adults, individuals of domestic violence, and to customers and employees of businesses such as hotels and motels where methamphetamine has been produced or seized.

Conclusion

Methamphetamine continues to take a terrible toll on this country. To combat this poison, the DEA is attacking methamphetamine on all fronts. Our enforcement efforts are focused not only on the large-scale methamphetamine trafficking organizations distributing this drug in the U.S., but also on those involved in providing the precursor chemicals necessary to manufacture this poison. The DEA is well aware of the importance of controlling the precursor chemicals necessary to produce methamphetamine and is working with our international counterparts to forge agreements to control the flow of these chemicals.

We are also working closely with our state and local law enforcement partners to assist in the elimination of the small toxic labs that have spread across the country. The DEA's Hazardous Waste Program, with the assistance of grants to state and local law enforcement, supports and funds the cleanup of a majority of the laboratories seized in the United States. The DEA has also taken an active role in the Victim Witness Assistance Program to assist methamphetamine's victims educating communities about the dangers of meth and other illicit drugs.

There are no easy answers to combating the spread of methamphetamine, but there are tools. The best weapon in our collective arsenal is knowledge. We must continue to make our youth better understand how methamphetamine can devastate their lives and harm their bodies. We must help law enforcement officers increase their tactical knowledge of how to effectively identify and attack meth traffickers, and thereby remove incentives for people to manufacture and sell methamphetamine. We must also improve public awareness of how methamphetamine tears apart communities, friendships, and families.

Thank you for your recognition of this important issue and the opportunity to testify here today. I will be happy to answer any questions.